FORM D

PROCESSED

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

DEC 1 4 2007 THOMSON FINANCIAL

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

10001	_
OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	
hours per respon	se16.00

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SEC USE ONLY					
Prefix		Serial			
D	TE RECEIV	ED			
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Eco-Safe Systems USA, Inc.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) RECEIVED Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA (DEC 1 0 2007)
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Eco-Safe Systems USA, Inc.
Address of Executive Offices (Number and Street, City. State, Zip Code) 7306 Coldwater Canyon, North Hollywood, CA 91605 Telephone Mumber (Including Area Code) (818) 503-8643
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business
Manufacturer of patented water treatment and water reclamation systems.
Type of Business Organization Corporation
CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

· ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

-		A. BASIC II	DENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:		-	
 Each promoter of t 	he issuer, if the iss	suer has been organized	within the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or o	firect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Each executive off 	icer and director of	f corporate issuers and o	of corporate general and man	naging partners of	partnership issuers; and
Each general and n	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Elliot, Michael	f individual)			<u> </u>	
Business or Residence Addre 7306 Coldwater Canyon,		·	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
McKiernan, Stanley					
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
445 South Figueroa Stree	t, Suite 2600, Lo	os Angeles, CA 9007	1		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i McCluney, Michael	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
7306 Coldwater Canyon,	North Hollywood	d, CA 91605			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			······································	
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)	···	
Check Box(es) that Apply:	Promoter	Beneficial Owne	r Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first.	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State. Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State. Zip	Code)		
	(Use bla	ank sheet, or copy and u	se additional copies of this	sheet, as necessary	<u> </u>

				В. П	NFORMAT	ION ABOU	T OFFERI	NG		_		
l. Has	he icener o	old or does t	he issuer in	itend to se	il to non-a	ccredited i	nvestors in	this offer	ino?		Yes Fi	No ⊠
. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Ľ						
2. What is the minimum investment that will be accepted from any individual?							\$ 99,900.00					
							Yes	No				
		ng permit join										X
comr If a p or sta	nission or s erson to be ates, list the	nation reques imilar remund listed is an as name of the b er. you may s	eration for s sociated pe proker or de	olicitation rson or ago aler. If mo	of purchase ent of a brok ore than five	ers in conno (er or deale e (5) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state		
ull Nam	e (Last nan	ne first, if ind	lividual)									
Business	or Residen	ce Address (1	Number and	Street, C	ity, State, Z	(ip Code)						
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Vame of	Associated	Broker or De	aler									
tates in	Which Pers	on Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				-		
(Che	ck "All Sta	tes" or check	individual	States)			•••••			***************************************	☐ Ai	l States
AL	AK	ΑŻ	AR	CA	CO	CT	DE	DC	FL	GA	н	ĪD
		IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT		NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
ull Nam	e (Last nar	ne first, if ind	lividual)				 	,				
Business	or Resider	ice Address (Number an	d Street, C	lity, State,	Zip Code)						
Name of	Associated	Broker or De	aler									
tates in	Which Per	on Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		.,				
(Che	ck "All Sta	tes" or check	individual	States)	***************************************			***************************************		***************************************		l States
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IL	ĪN	[IA]	KS	KY	[LA]	ME	MD	MA	MI	MN	MS	MO
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Business	or Resider	nce Address (Number an	d Street. C	ity, State	Zip Code)			-			
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Vame of	Associated	Broker or De	aler									
States in	Which Per	on Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		•				
(Che	ck "All Sta	tes" or check	individual	States)					,		☐ AI	l States
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ĪL		IA	KŠ	KY	LA	ME	MD	MA	MI	MN	MS	MO
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RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.	Aggregate		Amount Already
	Type of Security	Offering Price		Sold
	Debt	s_99,900.00		\$_99,900.00
	Equity		_	s
	☑ Common ☐ Preferred			
	Convertible Securities (including warrants)	s	_	\$
	Partnership Interests	s	_	\$
	Other (Specify)	\$		s
	Total	\$ 99,900.00		\$_99,900.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
	Accredited Investors	Investors		of Purchases \$ 99,900.00
			_	~
	Non-accredited Investors		_	\$
	Total (for filings under Rule 504 only)		_	\$
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		_	\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total		_	<u>\$_0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	.,,		\$
	Printing and Engraving Costs	[\$
	Legal Fees	[\$
	Accounting Fees	[\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			s
	Other Expenses (identify)	[s
	Total		٦	\$_0.00

b. Enter the difference between the aggregate offering price	given in response to Part C — Question 1		
and total expenses furnished in response to Part C — Question proceeds to the issuer."	4.a. This difference is the "adjusted gross		\$
i. Indicate below the amount of the adjusted gross proceed to the each of the purposes shown. If the amount for any purpose check the box to the left of the estimate. The total of the payric proceeds to the issuer set forth in response to Part C — Qu	e is not known, furnish an estimate and tents listed must equal the adjusted gross		
		Payments to Officers. Directors, & Affiliates	Payments to Others
Salaries and fees] \$	s
Purchase of real estate] \$	
Purchase, rental or leasing and installation of machinery and equipment		7\$	□ \$
Construction or leasing of plant buildings and facilities	-		
Acquisition of other businesses (including the value of sec offering that may be used in exchange for the assets or sec issuer pursuant to a merger)	irities of another] \$	s
Repayment of indebtedness] \$	s
Working capital		-] \$	\$_99,900.00
Other (specify):			
	·······] \$	s
Column Totals		\$ <u>0.00</u>	\$_99,900.00
Total Payments Listed (column totals added)		□ \$ <u>_</u> 99	9,900.00
D. FF	DERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersig signature constitutes an undertaking by the issuer to furnish to the he information furnished by the issuer to any non-accredited in	e U.S. Securities and Exchange Commiss	ion, upon writte	le 505, the following in request of its staff
ssuer (Print or Type) Signatu	re I	ate	
Eco-Safe Systems USA, Inc.		(1-	26-07
Name of Signer (Print or Type) Title of	Signer (Print or Type)		<i>y</i> - ,
fichael Elliot CEO			
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END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)